



# KAISER PERMANENTE®

Southern California

(800) 464-4000

## Plan Highlights

Kaiser Permanente's extensive program of managed care offers the kind of benefits you've been looking for:

### Convenient Care

- More than 90 medical offices and 10 major medical centers allow you to get care close to work or close to home – or both. You can receive care at any of our locations in Southern California.
- MRMIP subscribers can get care in six Southern California counties (Los Angeles, Orange, Riverside, San Bernardino, San Diego, and Ventura).
- We also contract with non-Kaiser Permanente hospitals to provide emergency and urgent care services in outlying areas.

### Broad-based Care

- Your family (including spouse and unmarried children under age 23) are also eligible for coverage under the MRMIP/Health Plan. Your annual maximum benefit total is \$75,000 per covered individual, and the lifetime maximum benefit is \$750,000 per covered individual.
- In addition to primary care visits, your MRMIP/Health Plan includes specialty care services, lab tests, X-rays and health education classes.

### A Plan That's Easy to Use

- There are no claim forms or deductibles for services received at Kaiser Permanente facilities.
- When you present your Kaiser card at one of our Health Plan facilities, our computerized registration system will identify your benefits and co-payments as described on the next page.
- Upon enrollment in the MRMIP/Kaiser Health Plan, you will receive

*The Guidebook to Kaiser Permanente Services.* This publication is a directory of all Southern California facilities and services available to our members.

## Plan Providers

- When you select Kaiser Permanente as your MRMIP Health Plan provider, your medical care is provided or arranged by Kaiser Permanente physicians at Kaiser Permanente medical facilities. Our dedicated physicians represent virtually all major medical and surgical specialties, and work together in one of the nation's largest medical groups to care for you and your family.
- We're proud of the caliber of our physicians. The national average for board certified physicians is 60%. At Kaiser Permanente, 85% of our physicians are board certified.
- You can choose your own Kaiser Permanente personal physician who will work with you to coordinate all your health care needs. You or your family may select a different physician at any time – your choice is never restricted to any one physician or facility.
- Emergency and urgent care are available from Kaiser Permanente 24 hours a day, 7 days a week. All necessary care, emergency or otherwise should be obtained at a Plan facility, if possible. However, in certain situations, emergency care may be obtained from non-plan providers.

## How the Plan Works

- **Always carry your Kaiser Permanente MRMIP/Health Plan card** – It has important information

which will assist you in making appointments and utilizing services. You can make an appointment by calling one of our convenient appointment centers.

- **Laboratories, X-ray services, and pharmacies** – These are located at each medical center (many pharmacies are open 24 hours). Urgent care is available on a walk-in basis at each facility. Medical advice by phone and emergency services are available 24 hours a day, seven days a week.
- **Referrals to specialists** – As a group practice, our physicians can easily refer you to a specialist within your service area, at another Kaiser Permanente service area, or to a non-plan specialist in the community when necessary.
- **Co-payments** – The maximum co-payments you pay in a calendar year are \$2,500 per individual and/or \$4,000 per family.
- **To Determine Your Rate** – Look under the Area in which you reside in the rate table. The rate is based on your age at the time you become eligible for services.

## Important Information

*For more information about the Southern California Kaiser Permanente MRMIP/Health Plan program, please call our Member Service Call Center at (800) 464-4000. Please note that the information presented on these pages is only a summary of the Kaiser Permanente MRMIP/Health Plan for Southern California. For exact terms and conditions of coverage, you should refer to the Evidence of Coverage Brochure.*

# Kaiser Permanente Southern California

## Benefit Summary

<i>Type of Service</i>	<i>Description of Service</i>	<i>What You Pay</i>
<b>Calendar Year Deductible</b>	The amount that you must pay before Kaiser Permanente assumes liability for the remaining cost of covered services	No deductible
<b>Co-payment</b>	Your cost of covered services	See specific service
<b>Out-of-Pocket Maximum</b>	The amount you're responsible for paying per calendar year	\$2,500 (per covered person) \$4,000 (per covered family)
<b>Annual Benefit Maximum</b>	The amount after which no more benefits are covered by Kaiser Permanente during a calendar year	\$75,000 (per covered person)
<b>Lifetime Benefit Maximum</b>	The amount after which no more benefits are covered by Kaiser Permanente during your lifetime	\$750,000 (per covered person)
<b>Hospital Services</b>	Physician and surgeon services, semi-private room & board, therapy, drugs	\$200 co-pay per inpatient day
<b>Physician Care</b>	Office visits, specialist visits Allergy treatments For children (under age 18) Routine physical examinations, hearing and vision tests Immunizations	\$15 co-pay per office visit \$3 co-pay per treatment  \$15 co-pay per office visit No charge
<b>Diagnostic X-Ray and Laboratory Tests</b>	Laboratory tests and X-rays, major diagnostic and mammography, ultraviolet light therapy	\$5 per visit
<b>Prescription Drugs</b>	Drugs prescribed by physician and obtained at a Plan pharmacy, according to Formulary guidelines	\$10 generic for up to a 100-day supply \$25 brand for up to a 100-day supply
<b>Durable Medical Equipment, Supplies, Prosthetic Devices and Braces</b>	Including artificial limbs, braces, oxygen, wheel chairs & hospital beds when prescribed by a SCPMG physician and obtained through Kaiser Permanente	20% of member rate No charge during hospital stay
<b>Maternity Care</b>	Prenatal & postnatal care Normal delivery Complications of pregnancy, C-section	\$15 co-pay per office visit \$500 co-pay per inpatient day \$500 co-pay per inpatient day
<b>Ambulance</b>	Ground transportation as medically necessary	\$50
<b>Emergency Care Services</b>	Plan and non-plan emergency room visits	\$50 co-pay per incident, waived if admitted (Hospitalization co-pays apply)
<b>Mental Health Care</b>	Mental health services Inpatient visits up to 10 days per calendar year* Outpatient visits up to 15 visits per calendar year*	\$200 co-pay per inpatient day \$15 co-pay per visit
<b>Home Health Care/Hospice Care</b>	Physician home visit Medically necessary visits by home health personnel  Hospice care for members diagnosed as having a terminal illness with a life expectancy of six months or less, if it is a medically appropriate and more cost-effective plan of treatment	No charge No charge for non-physician home health personnel No charge
<b>Skilled Nursing Services</b>	As medically necessary in lieu of hospitalization	No charge up to 100 days per benefit period
<b>Speech/Physical/ Occupational Therapy</b>	Therapist's services in a medical office or outpatient department for short-term therapy of acute conditions on an outpatient basis.	\$15 co-pay per visit
	During hospital stay	No charge
<b>Other</b>	Blood (administration of blood & blood plasma, including the cost of blood, blood plasma & blood processing)	No charge

**Note:** All care must be prescribed by and received from the Permanente Medical Group (SCPMG) physician, or a physician to whom a SCPMG physician has referred you for specific care. Any care received outside of Kaiser Permanente Southern California Region is not covered, with the exception of emergencies.

\*Except for severe mental illnesses, including serious emotional disturbances in children.